



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2020 MAY 29 PM 1:06

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/27/2020 Ending Date: 5/27/2020

Type of Report: (Check one): VED

☐ 8th day preceding preliminary ☒ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Juliana H. Brazile
Candidate Full Name (if applicable)

Town Clerk, Arlington
Office Sought and District

56 Coolidge Rd Arlington, MA 02476
Residential Address

E-mail: juli@brazile.net

Phone # (optional): _____

Brazile for Town Clerk
Committee Name

Robert Brazile
Name of Committee Treasurer

56 Coolidge Rd Arlington, MA 02476
Committee Mailing Address

E-mail: treasurer@brazile.net

Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

| | |
|----------------------------------------------------------|-----------------------------------|
| Line 1: Ending Balance from previous report | <u>N/A</u> |
| Line 2: Total receipts this period (page 3, line 11) | <u>8159</u> |
| Line 3: Subtotal (line 1 plus line 2) | <u>8159</u> |
| Line 4: Total expenditures this period (page 5, line 14) | <u>7226.45</u> |
| Line 5: Ending Balance (line 3 minus line 4) | <u>932.35</u> |
| Line 6: Total in-kind contributions this period (page 6) | <u>Ø</u> |
| Line 7: Total (all) outstanding liabilities (page 7) | <u>Ø</u> |
| Line 8: Name of bank(s) used: | <u>Leader Bank, Arlington, MA</u> |

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Robert Brazile (Treasurer's signature)

Date: 5/27/2020

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

Candidate without Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Juliana H. Brazile (Candidate's signature)

Date: 5/27/20

SCHEDULE A: RECEIPTS

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

| Date Received | Name and Residential Address (alphabetical listing required) | Amount | Occupation & Employer (for contributions of \$200 or more) |
|------------------------------------------------------------|-----------------------------------------------------------------|---------------|---------------------------------------------------------------|
| 2/22/2020 | Janice Bakey 17 Russell Pl Arlington, MA 02474 | \$60 | |
| 1/27/2020 | Juliana Brazile 56 Coolidge Rd Arlington, MA 02476 | \$100 | |
| 1/27/2020 | Juliana Brazile 56 Coolidge Rd Arlington, MA 02476 | \$1000 (loan) | home maker |
| 1/30/2020 | Juliana Brazile 56 Coolidge Rd Arlington, MA 02476 | \$1500 (loan) | home maker |
| 2/11/2020 | Juliana Brazile 56 Coolidge Rd Arlington, MA 02476 | \$1000 (loan) | home maker |
| 5/12/2020 | Juliana Brazile 56 Coolidge Rd Arlington, MA 02476 | \$1000 (loan) | home maker |
| 2/29/2020 | Mary K Cummings 135 Jason St Arlington, MA 02474 | \$100 | |
| 2/8/2020 | Joseph Curro 21 Millett St Arlington, MA 02474 | \$100 | |
| 3/15/2020 | Gregory Dennis 19 Wheaton Rd Arlington, MA 02474 | \$100 | |
| 3/15/2020 | James DiTullio 31 Fountain Rd Arlington, MA 02476 | \$100 | |
| 3/7/2020 | Catherine Farrell 76 Park St Arlington, MA 02474 | \$100 | |
| 5/12/2020 | Katharine Fennelly 97 Gray St Arlington, MA 02476 | \$100 | |
| Line 9: Total Receipts over \$50 (or listed above) | | | |
| Line 10: Total Receipts \$50 and under* (not listed above) | | | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | | ← Enter on page 1, line 2 |

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

| Date Received | Name and Residential Address (alphabetical listing required) | Amount | Occupation & Employer (for contributions of \$200 or more) |
|------------------------------------------------------------|---------------------------------------------------------------------|--------|---------------------------------------------------------------|
| 2/20/2020 | Deborah L. Goldsmith 24 Worthington Dr South Hadley, MA 01075 | \$100 | |
| 2/9/2020 | Camilla Haase 88 Park Ave Apt 401 Arlington, MA 02476 | \$75 | |
| 2/25/2020 | Adrian Harens 2401 Dryden Rd Houston, TX 77030 | \$100 | |
| 2/25/2020 | Christopher Heigham 82 Richfield Rd Arlington, MA 02474 | \$100 | |
| 2/7/2020 | Albert A. Hopeman 1 Manadnock Rd Arlington, MA 02476 | \$100 | |
| 3/1/2020 | Leonard Kardon 65 Tanager St Arlington, MA 02476 | \$150 | |
| 3/8/2020 | Nora Mann 45 Wollaston Ave Arlington, MA 02476 | \$100 | |
| 3/8/2020 | Christine Michael 6 Newton Rd #2 Arlington, MA 02474 | \$100 | |
| 2/14/2020 | John F. Page 26A Academy St Arlington, MA 02476 | \$100 | |
| 2/10/2020 | Allen Reedy 153 Renfrew St Arlington, MA 02476 | \$100 | |
| 2/7/2020 | Brian Rehrig 28 Academy St Arlington, MA 02476 | \$100 | |
| 2/15/2020 | Stephen A. Revitale 111 Sunnyside Ave Arlington, MA 02474 | \$100 | |
| 3/17/2020 | Elizabeth Rose 333 E. 68th St New York, NY 10065 | \$100 | |
| Line 9: Total Receipts over \$50 (or listed above) | | | |
| Line 10: Total Receipts \$50 and under* (not listed above) | | | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | | ← Enter on page 1, line 2 |

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

| Date Received | Name and Residential Address (alphabetical listing required) | Amount | Occupation & Employer (for contributions of \$200 or more) |
|------------------------------------------------------------|-----------------------------------------------------------------|--------|---------------------------------------------------------------|
| 2/16/2020 | Clarissa Rowe 137 Herbert Rd Arlington, MA 02474 | \$100 | |
| 2/16/2020 | Michael W. Stern 10 Farmer Rd Arlington, MA 02476 | \$100 | |
| 2/17/2020 | Jennifer D. Susse 45 Teel St Arlington, MA 02474 | \$100 | |
| 2/16/2020 | Laura Weiner 72 Jason St Arlington, MA 02476 | \$75 | |
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| Line 9: Total Receipts over \$50 (or listed above) | | 6966 | |
| Line 10: Total Receipts \$50 and under* (not listed above) | | 1199 | |
| Line 11: TOTAL RECEIPTS IN THE PERIOD | | 8159 | ← Enter on page 1, line 2 |

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

| Date Paid | To Whom Paid (alphabetical listing) | Address | Purpose of Expenditure | Amount |
|----------------------------------------------------------------|----------------------------------------|-----------------------------------------------|-------------------------------------|---------|
| 2/3/2020 | Swiftly Printing | 1386 Massachusetts Ave Arlington, MA 02476 | letter and envelope printing | 1238.12 |
| 2/5/2020 | USPS | 10 Court St Arlington, MA 02476 | postage for campaign mailing | 1100.00 |
| 2/13/2020 | Connolly Printing | 17 Gill St Woburn, MA 01801 | palm cards, buttons and stickers | 1111.38 |
| 2/20/2020 | Potter's Printing | 847 Pleasant St Fall River, MA 02723 | campaign yard signs | 1103.13 |
| 5/13/2020 | Connolly Printing | 17 Gill St Woburn, MA 01801 | postcards for mailing | 2604.19 |
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| Line 12: Total Expenditures over \$50 (or listed above) | | | | 7156.82 |
| Line 13: Total Expenditures \$50 and under* (not listed above) | | | | 69.83 |
| Line 14: TOTAL EXPENDITURES IN THE PERIOD | | | | 7226.65 |

Enter on page 1, line 4 →

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

[illegible]

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer. Page 6

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

[illegible]

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

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